

FEC
FORM 3REPORT OF RECEIPTS
AND DISBURSEMENTS
For An Authorized CommitteeRECEIVED.
SECRETARY OF THE SENATE
2 APR 12 PM 12:49

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Bob Casey for Senate Inc

ADDRESS (number and street)

PO Box 58746

Check if different
than previously
reported. (ACC)

Philadelphia

PA

19102

2. FEC IDENTIFICATION NUMBER ▼

C C00431056

3. IS THIS
REPORT

X

NEW
(N)

OR

AMENDED
(A)

ZIP CODE ▲

STATE ▼ DISTRICT

PA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

X

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on M M / D D / Y Y Y Y
04 / 24 / 2012

in the State of PA

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on M M / D D / Y Y Y Y
04 / 24 / 2012

in the State of PA

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2012

through

M M / D D / Y Y Y Y
04 / 04 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas A. Leonard

Signature of Treasurer

Thomas A. Leonard

Date

M M / D D / Y Y Y Y
04 / 12 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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(Revised 02/2003)